

PROSKAUER ROSE LLP

1001 Pennsylvania Avenue, NW
Suite 400 South
Washington DC 20004-2533
Telephone 202.416.6800
Fax 202.416.6899

NEW YORK
LOS ANGELES
BOSTON
BOCA RATON
NEWARK
NEW ORLEANS
PARIS

CUSTOMER NO: 61263

RECEIVED
CENTRAL FAX CENTER

AUG 09 2006

Fax Transmittal

Date August 9, 2006 Attorney Docket No. 23558-015

Total Pages (Including Cover) 12

From Paul M. Booth

Sender's Voice Number 202.416.5806

Sender's Room Number DC

Sender's Email Address pbooth@proskauer.com

Main Fax Number 202.416.6899

To: U.S. PATENT & TRADEMARK OFFICE

Fax No.: 571-273-8300

Message

OFFICIAL COMMUNICATION

RE: U.S. Application No. 09/856,859
Filing Date: September 6, 2001
First Named Inventor: Bronwyn Jean Battersby
Art Unit: 1653
Examiner: Jon D. Epperson

SUBMITTED PAPERS:

- CERTIFICATE OF TRANSMISSION UNDER 37 CFR 1.8 FORM PTO/SB/97 (1 page)
- TRANSMITTAL FORM PTO/SB/21 (1 page)
- FEE TRANSMITTAL FORM PTO/SB/17 (1 page)
- PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) (1 page)
- NOTICE OF APPEAL (1 page)
- AMENDMENT AND RESPONSE UNDER 35 USC § 1.116 (6 pages)

Confidentiality Note: This message is confidential and intended only for the use of the addressee(s) named above. It may contain legally privileged material. Dissemination, distribution or copying of this message, other than by such addressee(s), is strictly prohibited. If you have received this message in error, please immediately notify us by telephone and return the original to us at the address above. We will reimburse you for the cost of the telephone call and postage. Thank you.

PTO/SB-97 (09-04)
Approved for use through 07/31/2008. OMB 0951-0031
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1996, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Certificate of Transmission under 37 CFR 1.8

RECEIVED
CENTRAL FAX CENTER
AUG 09 2006

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office

on August 9, 2006
Date

Signature

Karen L. Hieronymus

Typed or printed name of person signing Certificate

202-416-6800

Registration Number, if applicable

Telephone Number

Note: Each paper must have its own certificate of transmission, or this certificate must identify each submitted paper.

IDENTIFIED SUBMITTED PAPERS RE: APPLN NO. 09/856,859:

- TRANSMITTAL FORM PTO/SB/21 (1 page)
- FEE TRANSMITTAL FORM PTO/SB/17 (1 page)
- PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) (1 page)
- NOTICE OF APPEAL (1 page)
- AMENDMENT AND RESPONSE UNDER 35 USC § 1.116 (6 pages)

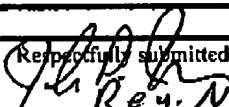
This collection of information is required by 37 CFR 1.8. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 1.5 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

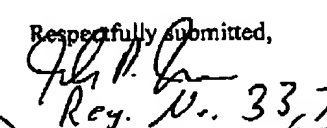
If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

TRANSMITTAL FORM	Application Serial Number	09/856,859
	Filing Date	September 6, 2001
	First Named Inventor	Bronwyn Jean Battersby
	Group Art Unit	1653
	Examiner Name	Jon D. Epperson
	Attorney Docket No.	23558-015
	Patent No.	Not applicable
	Issue Date	Not applicable

**RECEIVED
CENTRAL FAX CENTER
AUG 09 2006**

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Check Attached <input type="checkbox"/> Copy of Fee Transmittal Form <input checked="" type="checkbox"/> Amendment/Response <input type="checkbox"/> Preliminary <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson including Drawings (Total Sheets <u> </u>) <input checked="" type="checkbox"/> Petition for Extension of Time (2 months) <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Form PTO-1449 <input type="checkbox"/> Copies of IDS Citations <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Sequence Listing submission <input type="checkbox"/> Paper Copy/CD <input type="checkbox"/> Computer Readable Copy <input type="checkbox"/> Statement verifying identity of above	<input type="checkbox"/> Copy of Notice to File Missing Parts of Application (PTO-1553) <input type="checkbox"/> Formal Drawing(s) <input type="checkbox"/> Request For Continued Examination (RCE) Transmittal <input type="checkbox"/> Power of Attorney (Revocation of Prior Powers) <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> CD(s) for large table or computer program <input type="checkbox"/> Amendment After Allowance	<input type="checkbox"/> Request for Certificate of Correction <input type="checkbox"/> Certificate of Correction (in duplicate) <input checked="" type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences <input type="checkbox"/> Appeal Brief (in triplicate) <input type="checkbox"/> Status Inquiry <input type="checkbox"/> Return Receipt Postcard <input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8 <input type="checkbox"/> Additional Enclosure(s) (please identify below)

CORRESPONDENCE ADDRESS	SIGNATURE BLOCK
Direct all correspondence to: PATENT ADMINISTRATOR Proskauer Rose LLP 1001 Pennsylvania Ave., N.W. Suite 400 Washington, D.C. 20004 Tel. No.: (202) 416-6800 Fax No.: (202) 416-6899 CUSTOMER NO: 61263	Date: August 9, 2006 Reg. No.: 40,244 Tel. No.: (202) 416-6800 Fax No.: (202) 416-6899 Respectfully submitted,  <u>Reg. No. 33,715</u> Paul M. Booth Attorney for the Applicant(s) Proskauer Rose LLP 1001 Pennsylvania Ave., N.W. Suite 400 Washington, D.C. 20004

FEE TRANSMITTAL FY 2006					Complete if Known																																																																																											
					Application Serial No.		09/856,859																																																																																									
					Filing Date		September 6, 2001																																																																																									
					First Named Inventor		Bronwyn Jean Battersby																																																																																									
					Group No.		1653																																																																																									
					Examiner Name		Jon D. Epperson																																																																																									
					Confirmation No.		4713																																																																																									
METHOD OF PAYMENT					FEE CALCULATION (continued)																																																																																											
<input checked="" type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Other					4. ADDITIONAL FEES																																																																																											
<input checked="" type="checkbox"/> The Commissioner is hereby authorized to credit or charge any fee indicated below for this submission to Deposit Account No. 50-3840 <input checked="" type="checkbox"/> Required Fees (copy of this sheet enclosed). <input checked="" type="checkbox"/> Additional fee required under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Overpayment Credit. <input checked="" type="checkbox"/> Applicant claims small entity status.					<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;">Large Entity Fee (\$)</th> <th style="width: 10%;">Small Entity Fee (\$)</th> <th style="width: 50%;">Fee Description</th> <th style="width: 30%;">Fee Paid</th> </tr> </thead> <tbody> <tr> <td>130</td> <td>65</td> <td>Surcharge - late filing fee or oath</td> <td></td> </tr> <tr> <td>50</td> <td>25</td> <td>Surcharge - late provisional filing fee or cover sheet</td> <td></td> </tr> <tr> <td>130</td> <td>130</td> <td>Non-English specification</td> <td></td> </tr> <tr> <td>2,520</td> <td>2,520</td> <td>Request for ex parte re-examination</td> <td></td> </tr> <tr> <td>120</td> <td>60</td> <td>Extension for reply within 1st mo.</td> <td></td> </tr> <tr> <td>450</td> <td>225</td> <td>Extension for reply within 2nd mo.</td> <td>225.00</td> </tr> <tr> <td>1,020</td> <td>510</td> <td>Extension for reply within 3rd mo.</td> <td></td> </tr> <tr> <td>1,590</td> <td>795</td> <td>Extension for reply within 4th mo.</td> <td></td> </tr> <tr> <td>2,160</td> <td>1,080</td> <td>Extension for reply within 5th mo.</td> <td></td> </tr> <tr> <td>500</td> <td>250</td> <td>Notice of Appeal</td> <td>250.00</td> </tr> <tr> <td>500</td> <td>250</td> <td>Filing a brief in support of an appeal</td> <td></td> </tr> <tr> <td>1,000</td> <td>500</td> <td>Request for oral hearing</td> <td></td> </tr> <tr> <td>400</td> <td>0</td> <td>Petitions to the Director</td> <td></td> </tr> <tr> <td>180</td> <td>180</td> <td>Submission of IDS</td> <td></td> </tr> <tr> <td>790</td> <td>395</td> <td>Filing a submission after final rejection (37 CFR 1.129(a))</td> <td></td> </tr> <tr> <td>790</td> <td>395</td> <td>For each additional invention to be examined (37 CFR 1.129(b))</td> <td></td> </tr> <tr> <td>100</td> <td>100</td> <td>Certificate of Correction for applicant's error</td> <td></td> </tr> <tr> <td>130</td> <td>65</td> <td>Submission of Terminal Disclaimer</td> <td></td> </tr> <tr> <td colspan="2"></td> <td>Other fee (Specify)</td> <td></td> </tr> <tr> <td colspan="2"></td> <td>Other fee (Specify)</td> <td></td> </tr> <tr> <td colspan="2"></td> <td>4. TOTAL:</td> <td>475.00</td> </tr> </tbody> </table>				Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid	130	65	Surcharge - late filing fee or oath		50	25	Surcharge - late provisional filing fee or cover sheet		130	130	Non-English specification		2,520	2,520	Request for ex parte re-examination		120	60	Extension for reply within 1 st mo.		450	225	Extension for reply within 2 nd mo.	225.00	1,020	510	Extension for reply within 3 rd mo.		1,590	795	Extension for reply within 4 th mo.		2,160	1,080	Extension for reply within 5 th mo.		500	250	Notice of Appeal	250.00	500	250	Filing a brief in support of an appeal		1,000	500	Request for oral hearing		400	0	Petitions to the Director		180	180	Submission of IDS		790	395	Filing a submission after final rejection (37 CFR 1.129(a))		790	395	For each additional invention to be examined (37 CFR 1.129(b))		100	100	Certificate of Correction for applicant's error		130	65	Submission of Terminal Disclaimer				Other fee (Specify)				Other fee (Specify)				4. TOTAL:	475.00
Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid																																																																																													
130	65	Surcharge - late filing fee or oath																																																																																														
50	25	Surcharge - late provisional filing fee or cover sheet																																																																																														
130	130	Non-English specification																																																																																														
2,520	2,520	Request for ex parte re-examination																																																																																														
120	60	Extension for reply within 1 st mo.																																																																																														
450	225	Extension for reply within 2 nd mo.	225.00																																																																																													
1,020	510	Extension for reply within 3 rd mo.																																																																																														
1,590	795	Extension for reply within 4 th mo.																																																																																														
2,160	1,080	Extension for reply within 5 th mo.																																																																																														
500	250	Notice of Appeal	250.00																																																																																													
500	250	Filing a brief in support of an appeal																																																																																														
1,000	500	Request for oral hearing																																																																																														
400	0	Petitions to the Director																																																																																														
180	180	Submission of IDS																																																																																														
790	395	Filing a submission after final rejection (37 CFR 1.129(a))																																																																																														
790	395	For each additional invention to be examined (37 CFR 1.129(b))																																																																																														
100	100	Certificate of Correction for applicant's error																																																																																														
130	65	Submission of Terminal Disclaimer																																																																																														
		Other fee (Specify)																																																																																														
		Other fee (Specify)																																																																																														
		4. TOTAL:	475.00																																																																																													
FEE CALCULATION																																																																																																
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Application Type</th> <th style="width: 15%;">Filing</th> <th style="width: 15%;">Search</th> <th style="width: 15%;">Examination</th> <th style="width: 40%;">Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Utility</td> <td>300</td> <td>500</td> <td>200</td> <td></td> </tr> <tr> <td>Design</td> <td>200</td> <td>100</td> <td>130</td> <td></td> </tr> <tr> <td>Plant</td> <td>200</td> <td>300</td> <td>160</td> <td></td> </tr> <tr> <td>Reissue</td> <td>300</td> <td>500</td> <td>600</td> <td></td> </tr> <tr> <td>Provisional</td> <td>200</td> <td>0</td> <td>0</td> <td></td> </tr> </tbody> </table>					Application Type	Filing	Search	Examination	Fee Paid	Utility	300	500	200		Design	200	100	130		Plant	200	300	160		Reissue	300	500	600		Provisional	200	0	0																																																															
Application Type	Filing	Search	Examination	Fee Paid																																																																																												
Utility	300	500	200																																																																																													
Design	200	100	130																																																																																													
Plant	200	300	160																																																																																													
Reissue	300	500	600																																																																																													
Provisional	200	0	0																																																																																													
Small Entity Discount																																																																																																
1. TOTAL																																																																																																
2. EXCESS CLAIM FEES <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 60%;">Fee</th> <th style="width: 40%;">Small Entity Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>Each claim over 20 or, for Reissues, each claim over 20 and more than in the original parent</td> <td>50 25</td> </tr> <tr> <td>Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent.</td> <td>200 100</td> </tr> <tr> <td>Total Claims</td> <td>Extra Claims</td> </tr> <tr> <td colspan="2" style="text-align: right;">Fee Paid (\$)</td> </tr> </tbody> </table>					Fee	Small Entity Fee (\$)	Each claim over 20 or, for Reissues, each claim over 20 and more than in the original parent	50 25	Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent.	200 100	Total Claims	Extra Claims	Fee Paid (\$)																																																																																			
Fee	Small Entity Fee (\$)																																																																																															
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original parent	50 25																																																																																															
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent.	200 100																																																																																															
Total Claims	Extra Claims																																																																																															
Fee Paid (\$)																																																																																																
- 20 or HP- _____ x \$ _____ = _____ HP - highest number of total claims paid for, if greater than 20																																																																																																
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 60%;">Indep. Claims</th> <th style="width: 40%;">Extra Claims</th> </tr> </thead> <tbody> <tr> <td colspan="2" style="text-align: right;">Fee Paid (\$)</td> </tr> </tbody> </table>					Indep. Claims	Extra Claims	Fee Paid (\$)																																																																																									
Indep. Claims	Extra Claims																																																																																															
Fee Paid (\$)																																																																																																
- 3 or HP- _____ x \$ _____ = _____ HP - highest number of total claims paid for, if greater than 3																																																																																																
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 20%;">Multiple Dependent Claims</th> <th style="width: 20%;">Fee (\$)</th> <th style="width: 20%;">Small Entity fee (\$)</th> <th style="width: 40%;">Fee Paid (\$)</th> </tr> </thead> <tbody> <tr> <td></td> <td>360</td> <td>180</td> <td></td> </tr> </tbody> </table>					Multiple Dependent Claims	Fee (\$)	Small Entity fee (\$)	Fee Paid (\$)		360	180																																																																																					
Multiple Dependent Claims	Fee (\$)	Small Entity fee (\$)	Fee Paid (\$)																																																																																													
	360	180																																																																																														
2. TOTAL:																																																																																																
3. APPLICATION SIZE FEE					SIGNATURE BLOCK																																																																																											
If the specification and drawing exceed 100 sheets of paper, the applicationsize fee due is \$250 (\$125 for small entity) for each additional sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).					Respectfully submitted,  Reg. No.: 40,244 Tel. No.: (202) 416-6800 Fax No.: (202) 416-6899 For Paul M. Booth Attorney for the Applicant(s) Proskauer Rose LLP 1001 Pennsylvania Ave., N.W., #400 Washington, D.C. 20004																																																																																											
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Total Sheets</th> <th style="width: 15%;">Extra Sheets</th> <th style="width: 15%;">Additional 50 or fraction thereof</th> <th style="width: 15%;">Fee (\$)</th> <th style="width: 40%;">Fee Paid</th> </tr> </thead> <tbody> <tr> <td>-100=</td> <td>0</td> <td>/50=</td> <td>round up to a whole number x</td> <td>- 0.00</td> </tr> </tbody> </table>					Total Sheets	Extra Sheets	Additional 50 or fraction thereof	Fee (\$)	Fee Paid	-100=	0	/50=	round up to a whole number x	- 0.00																																																																																		
Total Sheets	Extra Sheets	Additional 50 or fraction thereof	Fee (\$)	Fee Paid																																																																																												
-100=	0	/50=	round up to a whole number x	- 0.00																																																																																												
3. TOTAL:																																																																																																
CORRESPONDENCE ADDRESS																																																																																																
Direct all correspondence to: Patent Administrator Proskauer Rose LLP 1001 Pennsylvania Avenue, N.W., Suite 400 Washington, D.C. 20004 Tel. No.: (202) 416-6800 Fax No.: (202) 416-6899 CUSTOMER NO: 61263																																																																																																

RECEIVED
CENTRAL FAX CENTER
AUG 09 2006